

DOCKET NO.: 265678US0PCT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE APPLICATION OF: Ryuji UENO

SERIAL NUMBER: 10/523,842

FILED: February 8, 2005

FOR: PHARMACEUTICAL COMPOSITIONS COMPRISING FK506 DERIVATIVES  
AND THEIR USE FOR THE TREATMENT OF ALLERGIC DISEASES

**RESPONSE TO NOTICE OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371**

COMMISSIONER FOR PATENTS  
Box PCT  
Alexandria, VA 22313

SIR:

Responsive to the notification dated May 31, 2005, and in accordance with the provisions of 35 U.S.C. 371, Applicants submit herewith a Rule 63 Declaration and additional claim fees of \$150.00. It is the belief of the applicant that there are a total of 40 claims in this application, including 3 independent claims, resulting in only 20 additional claims in excess of 20. Additional claims fees for 17 additional claims were submitted at the time of filing the application. Therefore, the claim fees in the amount of \$150 reflect the additional 3 claims in excess of 20.

In light of the foregoing, this application is deemed to be in proper condition for examination and such favorable action is earnestly solicited.

Our payment in the amount of \$150.00 is attached hereto. If any variance exists between the amount enclosed and the required Government fee, please charge or credit the difference to our Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

If these papers are not considered timely filed by the Patent and Trademark Office, then a petition is hereby made under 37 C.F.R. §1.136 and any additional fees required under 37 C.F.R. §1.136 for any necessary extension of time may be charged to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

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United States Patent & Trademark Office  
Credit Card Payment Form

**Credit Card Information**

Credit Card Type:  American Express

Credit Card Account #:

Credit Card Expiration Date: December 31, 2005

Name as it Appears on Credit Card: Paes, Tracia E.

Payment Amount: \$(US Dollars): 150.00

Signature:  Date: June 09, 2005

**Credit Card/Billing Address**

Street Address 1: Oblon, Spivak, McClelland, Maier & Neustadt, P.C.

Street Address 2: 1940 Duke Street

City: Alexandria

State: Virginia

Zip/Postal Code: 22314

Country: U.S.A.

Daytime Phone #: (703) 413-3000 Accounting Dept.

Fax #: (703) 413-2220

**Request and Payment Information**

Description of Request and Payment Information:

Additional Claim Fees

Application No.: 10/523,842

Patent/Registration No.:

Docket No.: 265678US

*If the cardholder includes a credit card number on any form or document other than the Credit Card Payment Form, the United States Patent & Trademark Office will not be liable in the event that the credit card number becomes public knowledge.*

Form #: 37543

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